FOR INSTRUCTIONS, SEE BACK OF FORM	Reset Form	FORM	
DISCLOSURE SUMMARY PAGE	1,000,100,11	DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organization)		(Rev. 07/2003)	REPORT
	V 2 5 2003	For Office Use Or	alv
IMPORTANT: Indicate type of committee you are reporting for:		Comm. #	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Cand (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support Slate of Candidates	didate	Scanned	
CANDIDATE COMMITTEES ONLY:			
Candidate Name Political Party Gordon Aistrops Political Party		/ danca	
Office Sought City Councilman for OTTUMWa District (if Senate	or House)		
£ 1. 9 11			
	34-5881		25-03
SIGNATURE OF TREASURER (or person filing this report) TELEPHOLOGICAL TREASURER (OF PERSON FILEPHOLOGICAL TREASURER (OF PERSON FILEPHOLOGICA TREASURER (OF PE	ONE	DATE S	IGNED
Late filed reports are subject to possible civi	l and crimina	l penalties.	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING S		. ponanco.	
		N //2\NON EL EG	TION VEAD
I AM FILING A Sdays prior 1 st of month ofter REPORT FOR AN (report date) Gines 8/60 from	VA (I) ELECTIO	N /(2)NON-ELECT	ION YEAR.
CHECK IF AMENDMENT TO REPORT DATED	Local	Committees, enter D	ate of Election
	Novs	y & Local Committee	3
Check if this is final (termination) report and attach Notice of Dissolution Form I	County Which	y & Local Committee Election is held	s, enter County in
(You must continue to file reports until a Notice of Dissolution is filed.)	JR-3.	Wapello	
	<u> </u>		
			
STATEMENT OF CASH ON	HAND		
CASH ON HAND at the beginning of the reporting period. (This is the total of all n by the committee. This amount MUST be the same as the cash on hand of the last reporting period, or must be zero if this is first report filed.)	må åle e e e el	s 840	.22
ADD TOTAL MONEY TAKEN IN THIS PERIOD		·+	J. 22
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-k	kind below)	1,726	. 15
Schedule F: Loans Received total (Attach Schedule F)		•	5 -
Schedule H: Total Sales of Campaign Property (Attach Schedule H)			0-
(Schedule H applies to Candidates' Committees Only)			···
	SUB-TOTAL	s 261	1. 27
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		\$ 2,56 2,56	19.57
Schedule B: Expenditures total (Attach Schedule B) (**also see debts an	d loans below)	256	b. 37
Schedule F: Loan Repayments total (Attach Schedule F)	•		· ^ -
CASH ON HAND at the end of this reporting period (if final report, balance must	***************************************		<u> </u>
be zero) (Attach DR-3)		s Z	er0
**UNPAID BILLS (From Schedule D - Attach Schedule D)			-0-
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)			0 -
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	•••••	\$	-0-
CANDIDATE COMMITTEES ONLY:			
CONSULTANT BREAKDOWN (Schedule G Attached?)		YE	- ,
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)		\$	NIA

For Instructions, See Back of Form

CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	(Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) AISTROPE for (Duncil		CK THIS BOX IF NDING FORM
17137rope tor Council		

SCHEDULE

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	ID#	John Helgerson,			INCOME
10-28-03	CK#	11374 14013 St. 07TUMWO, IA 52501		\$ 100 50	
	ID#	STEVE B. MENKE			
10-29-03	CK#	2305 N. Court OTTUMWS, IA 52501		10000	
	ID#	Dr. J. Brent Alt fillisch			
10-29-03		40 Woodshire Dr. OTTIMWS IA 52501		100 0	
	ID#	Randy J. Zern			
10-31-03		2 Raynan Drivi OTTUMWA TA 52501		100 00	
	ID#	Nancy A. Harms			
10-31-03	CK#	54 woodshire Dr. OTTUMWE, IA 52501		50 8	
	ID#	Kurt M. Anderson			[]
11-3-03	CK#	709 Edwards Dr. DTTUMWA, IA 52501		20 00	<u></u>
	ID#	JErome J. Gleich			
11-3-03	CK#	1005 Pronsylvanie Aug. OTTUYNWA, IA 52501		200 00	
	ID#	Norman R. Hutchison			
11-3-03	CK#	6 Birchwood Dr. OTTUMWS, IA 52501		25-10	
	ID#				
11-3-03		misc.		10 00	
	ID#				
11-3-03	CK#	misc		20 00	
			SUB-TOTAL	,7CC 0º	

TOTAL (if last page of this schedule)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	(Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) AISTOPE FOY COUNCIL	_	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#				
11-3-03	CK#	misc		* ZO 00	
	ID#	MISC H. Edwin Deflie			
11-10-03	CK#	14 Raynan Dr. OTTUMWE, TA 52501		50 m	
	ID#	Duc H Hanner			
11-16-03	CK#	1302 N. Elm St. OTDIAWE TA 52501	78 C/oss out account	2500	
	ID#	David Carponter			
11-16-03 11-16-03 11-25-03	CK#	GWOODShire Dr. OTTUMWZ TA 52501		10000	
•	ID#	Gordon E. Asstrope	71 (158		
11-25-03	CK#	10 Raynan Dr. OTTUMWZ, IA 52501	out excount	7765	
	ID#			•	
	CK#				
	ID#				
	CK#		,		
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
		L	SUB-TOTAL	c 67/15	

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

SCHEDULE

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES		
	CK THIS BOX IF NDING FORM		

COMMITTEE NAME	(Must be same as on	Statement of Or	ganization)
	iniage be sailed as off	Claternerit or Or	quinzunon,

AISTrope for Council

	STRUPU 7	or Council		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-29-03	ID#	OTTUMWS COUTIET 213 E. 2nd St. OTTUMWS, IA 52501	Newspaper advertising Asstrope for Council	\$ 3/3 O.7
10-30-03	ID# CK# <u></u> ごご 7	KLEE Pedio 601 W. 2ndst. OTTUMWZ, IA 52501	Redi advertising Aistrope for Council	200 00
10-30-03	CK# 558	KBIZ Radio 209 s. Merket Orrumus, IA 52501	Redio advertising Asstrore for Council	19840
11-25-03	ID# -\$ CK# 539	OTTUMWE Frinting 1055. Birch OTTUMWE IA 52501	Advertising Printing Austrope for Council	1,854 90
	ID# CK#			
	ID# CK#			
	ID# CK#		·	
	ID# CK#			

SUB-TOTAL

TOTAL (if last page of this schedule)

\$2,566.37

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.6(3)(i).)

Page	/	of	<u>/</u>
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